

This Form is for INTERNAL PTO USE ONLY
It does NOT get mailed to the applicant.

NOTICE OF FILING / CLAIM FEE(S) DUE (CALCULATION SHEET)

APPLICATION NUMBER: _____

Total Fee Calculation

	Fee Code	Total # Claims	Number Extra	X	Fee	Fee	=	Total
	Sm./Lg.				Sm. Entity	Lg. Entity		
Basic Filing Fee	201/101				_____	<u>760.-</u>	-	<u>760.-</u>
Total Claims >20	203/103	<u>40</u>	-20 =	<u>20</u>	X	<u>18.-</u>	-	<u>360.-</u>
Independent Claims >3	202/102	<u>11</u>	-3 =	<u>8</u>	X	<u>78.-</u>	-	<u>624.-</u>
Mult. Dep Claim Present	204/104				_____	_____	-	_____
Surcharge	205/105				_____	<u>130.-</u>	-	<u>130.-</u>
English Translation	139							_____
TOTAL FEE CALCULATION								<u>1874.-</u>

Fees due upon filing the application:

Total Filing Fees Due = \$ 1874.-

Less Filing Fees Submitted - \$ —

BALANCE DUE = \$ 1874.-

Figure 7